DATE:	February 24	, 2010				
TO:	City Clerk	· · · · · · · · · · · · · · · · · · ·			•	
FROM:	Representati	ve Emma Acosta				
ADDRESS	2 Civic Ce	nter Plaza, El Paso,	ГХ	_ TELEPHONE	(915)541-4572	
Please place	the following	; item on the (Check	one): CONS	ENT XX	REGULAR _	
Agenda for	the Council M	leeting of March	2, 2010	- t - t1 - C	y Development Steering	Committee
Item should	read as follow	requested by Ro				Committee as
SPECIAL II	NSTRUCTIO	NS:			·	
NAME OF B					T/REAPPOINTMENT at Steering Committee	Γ FORM
NOMINATE	DBY: Rep	oresentative Emma A	costa		DISTRICT:	3
NAME OF A	PPOINTEE	Shirley Neagle				
			(Please ver	rify correct spelling of name)		
BUSINESS A	ADDRESS:					
CITY:		ST:	ZIP: _		PHONE:	
						•
HOME ADD	RESS:					
CITY: El F	Paso	ST: <u>TX</u>	ZIP:		PHONE:	
NAME OF I	NCUMBENT		Dani	OSITION BEFORE el Armendariz	E IT BECAME VACANT	` ?
EXFINATIO	N DATE OF	INCOMBENT.		0/00/2010		
REASON PE	ERSON IS NO	LONGER IN OFFI	CE (CHECK O	RE	XPIRED: ESIGNED X EMOVED	
	DATE O	F APPOINTMENT:	03	/02/2010	<u> </u>	
EXPIRATIO	N DATE OF	NEW APPOINTEE:	06	/08/2010	<u> </u>	
PLEASE CH	IECK ONE O	F THE FOLLOWING	G:-	1 st TERM	[:	
				2 nd TERM	1 :	
			UI	NEXPIRED TERM	M: <u>X</u>	

Untitled

Shirley Neagle

Education:

Bachelor of Arts in Psychology (Texas Western College - El Paso, Texas Bachelor of Science - Nursing (University of Texas at El Paso)

Work History:

1980 Providence Memorial Hospital - 1979-1880 and 1988-2007 (El Paso, Texas)

Del Sol Hospital -1984-2007 (El Paso, Texas

University Hospital - 1980-1983 (El Paso, Texas)

I am currently not working or volunteering with any business or organization. I have discussed with the volunteer coordinator the possibility of volunteering with Hospice of El Paso.